

# ARIZONA DEPARTMENT OF HEALTH SERVICES

STATE OF ARIZONA

County Of Maricopa

} ss

CERTIFICATE NO. -33-

DOCKET NO. EMS 2747

THE ARIZONA DEPARTMENT OF HEALTH SERVICES has found, under the authority of A.R.S. §36-2232 et seq. and pursuant to Department of Health Services rules, that public necessity requires the operation of

**SUNSITES-PEARCE FIRE DISTRICT dba SUNSITES-PEARCE FIRE DISTRICT AMBULANCE SERVICE**

as a ground ALS and BLS ambulance service in the State of Arizona for the transportation of individuals who are sick, injured, wounded or otherwise incapacitated or helpless within the following service area, with the following central operations station and response times:

1. Service area: On the North: From Cochise Overpass, then East to the middle of the bombing range (Willcox Playa); on the East: From Willcox Playa, then South and Southeast to the Three Sisters Butte, then East to peak of Chiricahua Mountains, then south along Chiricahua Crest to Turkey Creek area; on the South: From the Turkey Creek area West to the Kicker Canyon Road to the crest of Dragoon Mountains (Courtland); on the West: From the Dragoon Mountains to the Gunnison Hills.
2. Central Operations Station: Pearce, Arizona (105 Tracy Road)
3. Response Times:
  - a. Fifteen (15) minutes on eighty-five (85) percent of all ambulance calls.
  - b. Twenty (20) minutes on ninety (90) percent of all ambulance calls.
  - c. Twenty-five (25) minutes on ninety-five (95) percent of all ambulance calls.
  - d. Thirty (30) minutes on one hundred (100) percent of all ambulance calls, excluding Turkey Creek, Courtland, and Cochise Stronghold which will require an additional five (5) minutes.

Now, therefore, by virtue of the authority vested in the Arizona Department of Health Services, under the constitution and laws of the State of Arizona, does hereby grant this

## CERTIFICATE OF NECESSITY

authorizing the operation of the aforesaid ambulance service for a period ending January 31, 2006 unless for cause sooner amended, suspended, revoked or terminated subject to the decisions and orders, and rules of the Department.

PROVIDED, that this certificate shall not be assigned nor transferred unless authorized by the Arizona Department of Health Services.

BY THE ORDER OF THE ARIZONA DEPARTMENT OF HEALTH SERVICES, IN

WITNESS WHEREOF, I CATHERINE R. EDEN  
the Director of the Arizona Department of Health Services, have hereunto set my hand and caused the official seal of the Arizona Department of Health Services to be affixed at Phoenix, Arizona on 11/10/03

DIRECTOR

TO BE FRAMED AND DISPLAYED IN A CONSPICUOUS PLACE